

**UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS**

UNITED STATES OF AMERICA,
Plaintiff,

v.

WILLIAM SMALLWOOD
Defendant

CRIMINAL NO. 04-10017-GAO

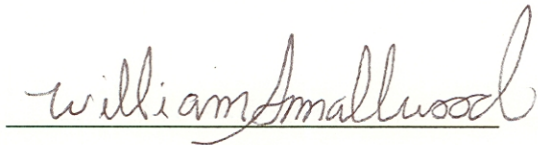
**DEFENDANT'S AFFIDAVIT IN AID OF SENTENCING AND MOTION FOR
DOWNWARD DEPARTURE**

I, William Smallwood, am the defendant in this case. My attorney has asked me to submit this affidavit to tell the court why I did not testify in front of the grand jury. As far back as I can remember, I have always had a problem paying attention to people when they are talking, especially in stressful situations. (A copy of a report written by a psychiatrist who evaluated me in 1997 is attached to this affidavit). I never did well in school and even went to a special school but I did not graduate. I was worried that if I started to answer questions in front of the grand jury, I would become confused and forgetful. I was worried that, because of my attention problems, I would answer the same question in different ways. I was also worried that I would answer a question that I didn't really understand.

At the time I was asked to testify in front of the grand jury, I was starting to serve my sentence in the case involving a gun and a shot that was fired at a house. I had pleaded guilty to those charges in state court, thinking that my guilty plea was the end

of the case. I wanted to go do my time and be done with it. I was surprised that I was being asked to testify about the case because I had pleaded guilty. I was also concerned that, if I testified in front of the grand jury, my time would be extra hard because I would constantly have to be looking over my shoulder.

Signed under the pains and penalties of perjury this 9th day of February, 2005.

A handwritten signature in cursive script, reading "William Smallwood", written in dark ink. The signature is written over a horizontal line.

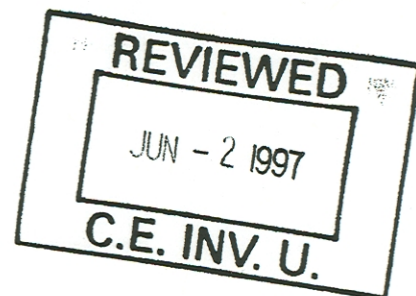
WILLIAM SMALLWOOD

MICHAEL BRAVERMAN, M.D.

Dict: 5/27/97 (A)

Re: William P. Smallwood
A/N 019-60-4282

Michael Braverman, M.D.
334 Broadway
Cambridge, MA 02139



Examiner: D. Phillips, Unit 17

Gentlemen:

DATE OF EVALUATION:

5/15/97. The CE was done in Cambridge Hospital.

This is a 17 year old who has been on disability. Apparently has ADD, but may also have chronic depression, atypical depression. Been on medications including Zoloft and Prozac.

Has been hospitalized twice over the past several years in a psychiatric unit, the Child Assessment Unit at Cambridge Hospital. He has ongoing dysthymia and dysphoria with difficulties concentrating, difficulties dealing with stress.

He does not appear to be on psychiatric medications now. He had trouble tolerating them and unfortunately he was reluctant to try other medications, although I did try to discuss this with him.

He was not able to finish school. He has tried to work for a few hours here or there cooking, but has difficulty persisting and difficulties tolerating stress. He is not in any treatment program now. He is not in any rehab program, school program, vocational program, or prevocational program. He lives with his family.

He had been to a special school called the Hayden School, but I am not sure that he completed that. When he was there, he was on medications, but since leaving he has not resumed medications.

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As far as I can tell, he has not been overtly psychotic or manic and there are no reports of substance abuse. No other medical problems reported.

CURRENT FUNCTIONING:

He lives with his grandmother, can take care of his ADL's. He is not in any day programs, school programs, vocational or prevocational programs. He has been trying to work part-time cooking. He is not in any psychiatric treatment now. He gets rides to go places.

MENTAL STATUS EXAMINATION:

The client arrived to the interview on time, brought by his grandmother who also accompanied him during the interview. He was neatly dressed and groomed.

He basically related appropriately to the interviewer, but he was subdued, dysphoric, slowed down, with difficulties concentrating, a persistent degree of dysphoria. He also seemed to have difficulty focusing and attending consistent with ADD.

No formal sign of thought disorder, psychosis, hallucinations, delusions, paranoia, mania, hypomania, pressured speech, PTSD symptoms, OCD symptoms or dissociative symptoms.

No acute suicidality, homicidality, or violent tendencies. No sign of substance abuse. No acute suicidality.

On cognitive exam, he had difficulties consistent with ADD. He was oriented x three. He knew Clinton, but did not remember the previous President. When asked how much change he would receive if he bought something for 60 cents and paid \$1.00 he incorrectly said 45 cents. He only remembered five out of seven. Only remembered two out of three. Spelled "house" correctly. Spelled "world" forward correctly, but got confused spelling it backwards saying "d, o, l, r, w." Insight and judgment are fair.

IMPRESSIONS:

- (1) This is a 17 year old boy with several issues; ADD, hyperactivity, apparent atypical depression. He has been

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hospitalized twice. He was on medications, but he stopped them. Unfortunately he is not currently in treatment. He has been to a special school. He has had difficulty maintaining stability.

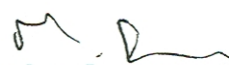
At this point, he still has significant symptoms due to ADD, hyperactivity, dysphoria, difficulties concentrating, difficulties persisting at tasks, difficulty dealing with stress. Unfortunately, he is not in treatment now. He had difficulty tolerating medications. He seems ambivalent about going back into treatment and I strongly encourage him to do that. He needs an intensive treatment program and rehab program.

He is not capable of handling funds.

Please feel free to contact me at 661-7315 if there are any questions regarding this report.

Thank you.

Very truly yours,


Michael Braverman, M.D.

This transcription was made from a recording of the voice of Michael Braverman, M.D., by D. Bourque on 5/28/97.